



FORM
LOB
(Rev. 5/2013)



**HAWAII STATE ETHICS COMMISSION
LOBBYIST'S EXPENDITURES AND CONTRIBUTIONS REPORT**

MAY 13 9:40

REPORT YEAR: 2013

Amended Statement

For Lobbying Reporting Period:

January 1 - last day of February

March 1 - April 30

May 1 - December 31

STATE OF HAWAII

STATE ETHICS COMMISSION

LOBBYIST INFORMATION

Last Name

Okudara

First Name

Jon

M.I.

Lobbyist Firm/Employer

Okudara & Assoc., Inc

Mailing Address (Number and Street or P.O. Box)

333 Queen St. #902

City

Hon

State

HI

Zip Code

96813

Telephone 5341244 Extension

Email Address

okudara@hawaii.rr.com

PART I. TOTAL EXPENDITURES (Attached Additional Sheets As Needed)

EXPENDITURES (ROUND TO THE NEAREST DOLLAR) MADE BY LOBBYIST FOR EACH ORGANIZATION REPRESENTED

Organization's Names	Preparation & Distribution of Lobbying Materials	Media Advertising	Fees Paid to Lobbyist	Entertainment & Events	Receptions, Meals, Food & Beverages	Gifts	Other Disbursements	Loans	EXPENDITURES	TOTAL
1. <u>Hawaii Tourism Auth.</u>									0	0
2. <u>Kamehameha Schools</u>									0	0
3. <u>Pacific Hsg. Assis. Corp.</u>									0	0
4. <u>Maui Mem. Med. Center</u>									0	0
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
13.										
14.										
15.										
16. Total Expenditures from Additional Attached Sheet(s)										

Add Total Expenditures (lines 1 through 16)

Total Expenditures

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EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List all expenditures incurred by lobbyist for the purpose of lobbying of \$25 or more per person per day during the statement period

Name	On Behalf of ORG	Amount or Value

Check here if additional sheets are attached

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List all expenditures incurred by lobbyist for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

Name	On Behalf of ORG	Amount or Value

Check here if additional sheets are attached

PART II. CONTRIBUTIONS RECEIVED

List all contributions received by lobbyist for the purpose of lobbying in the total sum of \$25 or more per person during the statement period

Name	On Behalf of ORG	Amount or Value



Check here if additional sheets are attached

PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period.

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other (indicate below):
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

AUTHORIZED PERSON

Print Name of Authorized Person (First M.I. Last) _____ Title _____ Date (m/d/yyyy) _____

CERTIFICATION: By checking this box, you signify and affirm that you are the person whose name appears as the "Authorized Person" above and the information contained in the form is true, correct and complete to the best of your knowledge and belief. You further certify that you understand that there are statutory penalties for failing to report the information required by Hawaii law.